

FILED
May 01, 2007 8:00 am
Secretary of State

05-01-2007 90008 026 ***158.75

**2007 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # P96000100927					
1. Entity Name BALLANTINE, INC.					
Principal Place of Business 16520-26 SOUTH TAMiami TRAIL FORT MYERS, FL 33908			Mailing Address 16520-26 SOUTH TAMiami TRAIL FORT MYERS, FL 33908		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
4. FEI Number 65-0712867				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent BALLANTINE, RICHARD 16520-26 SOUTH TAMiami TRAIL FORT MYERS, FL 33908			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fee			
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BALLANTINE, ELIZABETH A 16520-26 SOUTH TAMiami TRAIL FORT MYERS, FL 33908	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BALLANTINE, ELIZABETH ANN 16520-26 SOUTH TAMiami TRAIL FORT MYERS, FL 33908	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BALLANTINE, RICHARD J JR 16520-26 SOUTH TAMiami TRAIL FORT MYERS, FL 33908	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BALLANTINE, LISA F 16520-26 SOUTH TAMiami TRAIL FORT MYERS, FL 33908	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or a supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Elizabeth Ann Ballantine</u> 4/30/07 239 433-2030 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					